



DIRECT DEBIT MANDATE FORM

To,
The Manager
IDFC FIRST Bank Limited,
_____ Branch

Ref: _____

I/We hereby authorise you to debit my/our account for making payment to IDFC FIRST Bank Limited through the direct debit clearing as per the details mentioned herein under. I/We authorise IDFC FIRST Bank Limited to raise demands from me/us till all my/our dues to IDFC FIRST Bank Limited as referred herein are cleared through the direct debit from my/our account.

I/We unconditionally consent and authorise IDFC FIRST Bank Limited to raise debits for such amounts as may be calculated by IDFC FIRST Bank Limited from time to time. However, the debits of such amount shall not exceed Rs. _____/- (Rupees _____/- only) per month.

I undertake to maintain sufficient balances to cover the Loan Repayment Dues (and charges,if any) on the stipulated due dates. I also understand that the failure to repay my loan amount through this instruction shall be treated as a default in repayment of dues and all charges/penalties/levies as covered by the agreement will hold good towards the non-payment of obligations.

Please treat this as an irrevocable communication as an authorization to debit my account every month with the required amounts towards the repayment of my loan.

In the event of the above account getting closed/transferred for any reason, I/We will intimate to the Bank the new account opened with the bank to debit the Loan Repayment amounts as per the agreement. Further I/WE undertake the responsibility to provide the fresh set of Mandate and security PDC's for such new account, as per terms of the agreement in lieu of existing instructions.

I /We also understand and accept that the Bank will have the right to set-off, without prior intimations to me, the available balances in the designated account for recovery of overdue installments and/or charges(if any) in the loan account.

I/We declare that the particulars given herein are correct and complete. If any direct debit transaction is delayed or not effected for reasons of incomplete or incorrect information, I/we shall not hold you responsible. I/We authorise you to debit my/our account towards such charges as may be determined by you for the service of direct debit.

I/We authorise IDFC FIRST Bank Limited and their representatives, agents, service providers etc. to get this form verified and acknowledged from your Bank.

NAME OF ACCOUNT HOLDER(S) _____

ACCOUNT NUMBER _____

ACCOUNT TYPE _____

LOAN ACCOUNT NUMBER _____

DATE OF EFFECT _____

Loan Type and Details	Periodicity (Monthly/Quarterly/As & When Presented)	Amount of Upper Limit	Valid Up to
	As & When Presented		Until Cancelled

SIGNATURE OF ACCOUNT HOLDER (1)

SIGNATURE OF ACCOUNT HOLDER (2)

Place _____

Place _____

Date
D D M M Y Y Y Y

Date
D D M M Y Y Y Y

I/We hereby certify that the particulars and signature(s) furnished above are as per our records.

Name:

Employee ID :

Date
D D M M Y Y Y Y

Bank Stamp and Signature of Authorised Official